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## NOTICE OF ALLOWANCE AND FEE(S) DUE

24126

7590

09/17/2007

ST. ONGE STEWARD JOHNSTON & REENS, LLC 986 BEDFORD STREET STAMFORD, CT 06905-5619

EXAMINER						
FIDEI, DAVID						
ART UNIT	PAPER NUMBER					

3728 DATE MAILED: 09/17/2007

-	APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
	10/814,455	03/31/2004	Ashley Andersen	03986- P0001B	7381

TITLE OF INVENTION: BOOK WITH CD HOLDER

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$0	\$700	12/17/2007

THE APPLICATION IDENTIFIED ABOVE HAS BEEN EXAMINED AND IS ALLOWED FOR ISSUANCE AS A PATENT. PROSECUTION ON THE MERITS IS CLOSED. THIS NOTICE OF ALLOWANCE IS NOT A GRANT OF PATENT RIGHTS. THIS APPLICATION IS SUBJECT TO WITHDRAWAL FROM ISSUE AT THE INITIATIVE OF THE OFFICE OR UPON PETITION BY THE APPLICANT. SEE 37 CFR 1.313 AND MPEP 1308.

THE ISSUE FEE AND PUBLICATION FEE (IF REQUIRED) MUST BE PAID WITHIN THREE MONTHS FROM THE MAILING DATE OF THIS NOTICE OR THIS APPLICATION SHALL BE REGARDED AS ABANDONED. THIS STATUTORY PERIOD CANNOT BE EXTENDED. SEE 35 U.S.C. 151. THE ISSUE FEE DUE INDICATED ABOVE DOES NOT REFLECT A CREDIT FOR ANY PREVIOUSLY PAID ISSUE FEE IN THIS APPLICATION. IF AN ISSUE FEE HAS PREVIOUSLY BEEN PAID IN THIS APPLICATION (AS SHOWN ABOVE), THE RETURN OF PART B OF THIS FORM WILL BE CONSIDERED A REQUEST TO REAPPLY THE PREVIOUSLY PAID ISSUE FEE TOWARD THE ISSUE FEE NOW DUE.

#### **HOW TO REPLY TO THIS NOTICE:**

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If the SMALL ENTITY is shown as YES, verify your current SMALL ENTITY status:

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- B. If the status above is to be removed, check box 5b on Part B Fee(s) Transmittal and pay the PUBLICATION FEE (if required) and twice the amount of the ISSUE FEE shown above, or

If the SMALL ENTITY is shown as NO:

- A. Pay TOTAL FEE(S) DUE shown above, or
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- III. All communications regarding this application must give the application number. Please direct all communications prior to issuance to Mail Stop ISSUE FEE unless advised to the contrary.

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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/814,455 03/31/2004 Ashle		Ashley Andersen	03986- P0001B 7381			
24126 75	590 09/17/2007		EXAMINER			
ST. ONGE STEV	WARD JOHNSTON	FIDEI, DAVID				
986 BEDFORD ST		ART UNIT	PAPER NUMBER			
STAMFORD, CT 06905-5619			3728			
		DATE MAILED: 09/17/2007				

# Determination of Patent Term Adjustment under 35 U.S.C. 154 (b)

(application filed on or after May 29, 2000)

The Patent Term Adjustment to date is 522 day(s). If the issue fee is paid on the date that is three months after the mailing date of this notice and the patent issues on the Tuesday before the date that is 28 weeks (six and a half months) after the mailing date of this notice, the Patent Term Adjustment will be 522 day(s).

If a Continued Prosecution Application (CPA) was filed in the above-identified application, the filing date that determines Patent Term Adjustment is the filing date of the most recent CPA.

Applicant will be able to obtain more detailed information by accessing the Patent Application Information Retrieval (PAIR) WEB site (http://pair.uspto.gov).

Any questions regarding the Patent Term Extension or Adjustment determination should be directed to the Office of Patent Legal Administration at (571)-272-7702. Questions relating to issue and publication fee payments should be directed to the Customer Service Center of the Office of Patent Publication at 1-(888)-786-0101 or (571)-272-4200.

#### PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

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24126 7590 09/17/2007 ST. ONGE STEWARD JOHNSTON & REENS, 986 BEDFORD STREET STAMFORD, CT 06905-5619			LC I h Ste ad tra	Certificate of Mailing or Transmission  I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
						·	(Depositor's name)
							(Signature)
			L				(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R	ATTOR	NEY DOCKET NO.	CONFIRMATION NO.
10/814,455 TITLE OF INVENTION	03/31/2004 EBOOK WITH CD HO	LDER	Ashley Andersen		03	986- P0001B	7381
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nonprovisional	YES	\$700	\$0	\$0		\$700	12/17/2007
EXAM	INER	ART UNIT	CLASS-SUBCLASS	ר			
FIDEI, I	DAVID	3728	206-232000	J			
1. Change of corresponde	ence address or indicatio	n of "Fee Address" (37	2. For printing on the	patent front page, lis	it		· .
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to agents OR, alternated (2) the name of a sing registered attorney or	nes of up to 3 registered patent attorneys  R, alternatively,  ne of a single firm (having as a member a attorney or agent) and the names of up to d patent attorneys or agents. If no name is			
	_	A TO BE PRINTED ON		•			
PLEASE NOTE: Unl	less an assignee is ident h in 37 CFR 3.11. Comp		data will appear on the	patent. If an assign assignment.			cument has been filed for
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4a. The following fee(s) are submitted:    Issue Fee   Publication Fee (No small entity discount permitted)   Advance Order - # of Copies			b. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).				
5. Change in Entity Stat	tus (from status indicated	d above)	overpayment, to Bep	osit Account Numbe	,1	(cherose an	exua copy of this form).
a. Applicant claim	s SMALL ENTITY statu	is. See 37 CFR 1.27.					
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